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Bib Data Sheet

CONFIRMATION NO. 9160

SERIAL NUMBER 09/934,721	FILING DATE 08/22/2001 RULE	CLASS 707	GROUP ART UNIT 2172	ATTORNEY DOCKET NO. SVL920010022US1
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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 09/24/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 8	TOTAL CLAIMS 51	INDEPENDENT CLAIMS 3
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

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TITLE

METHOD, SYSTEM, AND PROGRAM FOR TRANSFORMING FILES FROM A SOURCE FILE FORMAT TO A
DESTINATION FILE FORMAT

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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